

**DISSOLUTION OF
CIVIL UNION COMPLAINT**

JD-FM-159A Rev. 12-19
C.G.S. §§ 46b-38tt, 46b-45;
P.B. § 25-2, et seq.

**STATE OF CONNECTICUT
SUPERIOR COURT**

www.jud.ct.gov

**CROSS COMPLAINT CODE ONLY
CRSCMP**

Complaint: Complete this form. Attach a completed *Summons* (JD-FM-3), a *Notice of Automatic Court Orders* (JD-FM-158) and a blank *Appearance* (JD-CL-12).

Amended Complaint.

Cross Complaint: Complete this form and attach to the *Answer* (JD-FM-160) unless it is already filed.

ADA NOTICE
The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at www.jud.ct.gov/ADA.

Judicial District of	At (Town)	Return date (Month, day, year)	Docket Number
Plaintiff's name (Last, First, Middle Initial)		Defendant's name (Last, First, Middle Initial)	
1. Plaintiff's birth name if different from above		2. Defendant's birth name if different from above	
3. Date of civil union	4. Town and state, or country where civil union took place		

5. (Check all that apply)

The ("X" one) plaintiff defendant has lived in Connecticut for at least twelve months before the filing of this dissolution of civil union complaint or before the dissolution of civil union will become final.

The ("X" one) plaintiff defendant lived in Connecticut at the time of the civil union, moved away, and then returned to Connecticut, planning to live here permanently.

The civil union broke down after the ("X" one) plaintiff defendant moved to Connecticut.

6. A dissolution of the civil union is being sought because: (Check all that apply)

This civil union has broken down irretrievably and there is no possibility of getting back together.

Other (must be reason(s) listed in Connecticut General Statute section 46b-40(c)):

Check and complete all that apply for items 7-14. Attach additional sheets if needed.

7. No children were born to either the plaintiff or defendant after the date of this civil union.

8. There are no minor children of this civil union.

9. The following children have been born to the ("X" all that apply) plaintiff defendant or have been adopted before, on, or after the date of this civil union and the other party to this civil union is the parent/adoptive parent.

(List only children who have not yet reached the age of 23.)

Name of Child (First, Middle Initial, Last)	Date of Birth (Month, day, year)

10. The following children were born after the date of this civil union to the ("X" all that apply) plaintiff defendant and are not the children of the other party to this civil union.

Name of Child (First, Middle Initial, Last)	Date of Birth (Month, day, year)

11. The ("X" all that apply) plaintiff defendant is pregnant with a child due to be born on (date) _____

12. If there is a court order about any child listed above, name the child(ren) below and the person or agency awarded custody or providing support:

Child's name	Name of person or agency
Child's name	Name of person or agency
Child's name	Name of person or agency

13. The ("X" all that apply) plaintiff defendant or any of the child(ren) listed above has received financial support from the State of Connecticut. ("X" one)
 Yes No Do not know

If yes, send a copy of the Summons, Complaint, Notice of Automatic Court Orders and any other documents filed with this Complaint to the Assistant Attorney General, 165 Capitol Avenue, Hartford, CT 06106, and file the Certification of Notice (JD-FM-175) with the court clerk.

14. The ("X" all that apply) plaintiff defendant or any of the child(ren) listed above has received financial support from a city or town in Connecticut. ("X" one)

Yes (State city or town: _____) No Do not know

If yes, send a copy of the Summons, Complaint, Notice of Automatic Court Orders and any other documents filed with this Complaint to the City Clerk of the town providing assistance and file the Certification of Notice (JD-FM-175) with the court clerk.

The Court is asked to order: (Check all that apply)

<input type="checkbox"/> A dissolution of civil union.	<input type="checkbox"/> Visitation.
<input type="checkbox"/> A fair division of property and debts.	<input type="checkbox"/> Name change to: _____
<input type="checkbox"/> Alimony.	<input type="checkbox"/> Sole custody.
<input type="checkbox"/> Child Support.	<input type="checkbox"/> Joint legal custody, Primary residence with: _____
<input type="checkbox"/> An order for the post-majority educational support of the child(ren) pursuant to C.G.S. section 46b-56c.	

And anything else the Court deems fair.

Signature	Print name of person signing	Date signed
Address	Juris number (If applicable)	Telephone (Area code first)

If this is an Amended Complaint or a Cross Complaint, you must mail or deliver a copy to anyone who has filed an appearance and you must complete the certification below.

Certification

I certify that a copy of this document was or will immediately be mailed or delivered electronically or non-electronically on (date) _____ to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties of record who received or will immediately be receiving electronic delivery. Name and address of each party and attorney that copy was or will be mailed or delivered to*

*If necessary, attach additional sheet or sheets with name and address which the copy was or will be mailed or delivered to.

Signed (Signature of filer) ►	Print or type name of person signing	Date signed
Mailing address (Number, street, town, state and zip code)		Telephone number